Attorney's Docket No.	<u> </u>	PATENT <sub>.</sub>

### COMBINED DECLARATION AND POWER OF ATTORNEY

	DIVISIONAL, CONTINUATION OR C-I-P)
As a below r	named inventor, I hereby declare that:
	TYPE OF DECLARATION
This declarat	tion is of the following type:  (check one applicable item below)
	(check one applicable item below)
x origin	nal.
desig	n.
suppl	emental.
NOTE: If the part a	declaration is for an International Application being filed as a divisional, continuation or continuation-in- pplication, do <u>not</u> check next item; check appropriate one of last three items.
nation	nal stage of PCT.
NOTE: If one	of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL. FINUATION OR C-I-P.
divisi	onal.
contin	nuation.
contin	nuation-in-part (C-I-P).
	INVENTORSHIP IDENTIFICATION
WARNING:	If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.
am the original inventor (if p	e, post office address and citizenship are as stated below, next to my name. I believe that I hal, first and sole inventor (if only one name is listed below) or an original, first and joint plural names are listed below) of the subject matter that is claimed, and for which a patent the invention entitled:
	TITLE OF INVENTION
	Method in speech recognition and a speech recognition device

### SPECIFICATION IDENTIFICATION

the specification of which:  (complete (a), (b), or (c))	
(a) x is attached hereto	
(b) was filed on as Serial No. 0/ or Express Mail No., As Serial No. not yet known and was amended on	(if applicable).
NOTE: Amendments filed after the original papers are deposited with the PTO a filing date by being referred to in the declaration. Accordingly, the am application papers or, in the case of a supplemental declaration, are encompassed in the original statement of invention or claims. See 37 CF	endments involved are those filed with the ethose amendments claiming matter not
(c) was described and claimed in PCT International Application	on No.
, filed on	and as
amended under PCT Article 19 on	(if any).
ACKNOWLEDGEMENT OF REVIEW OF PAPERS A	ND DUTY OF CANDOR
I hereby state that I have reviewed and understand the contents of including the claims, as amended by any amendment referred to about	the above-identified specification, ove.
I acknowledge the duty to disclose information, which is materia Code of Federal Regulations, § 1.56,	l to patentability as defined in 37,
(also check the following items, if des	ired)
and which is material to the examination of this application, is a substantial likelihood that a reasonable Examiner would whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an informa accordance with 37 CFR 1.98.	consider it important in deciding
PRIORITY CLAIM (35 U.S.C § 119	(a)-(d))
I hereby claim foreign priority benefits under Title 35, United State application(s) for patent or inventor's certificate or of any PCT inte at least one country other than the United States of America list below any foreign application(s) for patent or inventor's cer application(s) designating at least one country other than the Unite the same subject matter having a filing date before that of the claimed.	rnational application(s) designating ed below and have also identified tificate or any PCT international d States of America filed by me on
(complete (d) or (e)	
(d) no such applications have been filed.	
(e) x such applications have been filed as follows.	
NOTE: where item (c) is entered above and the International Application which check item (e), enter the details below and make the priority claim.	designated the U.S. itself claimed priority

(Declaration and Power of Attorney [1-1]-page 2 of 6)

# PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)—(d)

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
Finland	990078	18 January 1999	x YES NO
			YES NO
			YES NO
			YES NO
			YES NO
PROVISIONAL APPLIC	CATION NUMBER	FILI	NG DATE
		· · · · · · · · · · · · · · · · · · ·	
		·	
CLAIM F	OR BENEFIT OF EARI UNDER 35		ATION(S)
ADDED		DECLARATION AND I	th in the attached POWER OF ATTORNEY ATION-IN-PART (C-I-P)

APPLICATION

## ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE:	basis for this applicat	tion entering the United S then also complete ADI VISIONAL, CONTINUAT	from the filing date of this application is a PCT filing forming the States as (1) the national stage, or (2) a continuation, divisional, or DED PAGES TO COMBINED DECLARATION AND POWER OF TION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT
		POWER	OF ATTORNEY
I hereb	by appoint the follows in the Patent and	ving attorney(s) and/ Trademark Office co	onnected therewith.
		(list name and	d registration number)
Claren	ce A. Green	(24,622)	
Harry	F. Smith	(32,493)	•
Mark l	F. Harrington	(31,686)	
		(check the follo	owing item, if applicable)
	Attached, as part o above-named attor	f this declaration and ney(s) to accept and	d power of attorney, is the authorization of the follow instructions from my representative(s).
SEND	CORRESPONDEN	ICE TO	DIRECT TELEPHONE CALLS TO: (Name and telephone number)
Claren	ce A. Green		Clarence A. Green
	n & Green, LLP		(203) 250–1800
	ost Road	•	
	14 CT 06430	•	

### **DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

#### SIGNATURE(S)

NOTE: Co	arefully indicate the family (or last) name, as it should appear on the fili	ing receipt and all other documents.
Full name of so	le or first inventor	
Kari	e of first inventor	Laurila
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
(GIVEN WANE)	(MIDDLE INTINE OKTAINE)	Tambi (ok bijo i i i i i i i i i i i i i i i i i i
Inventor's signature	2	
Date	20 December 1999 Country of Citizens	ship Finland
Residence	Insinöörinkatu 64 A 14, FIN-33720 Tampere, Finland	d
Post Office Address	Insinöörinkatu 64 A 14, FIN-33720 Tampere, Finland	d
		<del></del>
	·	
Full name of sec	cond joint inventor, if any	
Juha		Häkkinen
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
	1. a. 15-01	
Inventor's signature	- Julia De J	
Date	20 December 1999 Country of Citizens	•
Residence	Lukonmäenkatu 20 B 11, FIN-33710 Tampere, Finla	nd
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• •		
	•	
	ird joint inventor, if any	
Ramalingam		Hariharan
(GIVEN NAME)	MIDDLE INITIAL OR NAME	FAMILY (OR LAST NAME)
Inventor's signature	Mamaham	
Date	20 December 1999 Country of Citizens	ship India
Residence	Lindforsinkatu 6 A 12, FIN-33720 Tampere, Finland	
Post Office Address	Lindforsinkatu 6 A 12, FIN-33720 Tampere, Finland	

(Declaration and Power of Attorney [1-1]-page 5 of 6)

(check proper box(es) for any of the following added page(s)  that form a part of this declaration)	
Signature for fourth and subsequent joint inventors. Number of pages added	
* * *	
Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added	
* * *	
Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added	
* * *	
Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 CFR 1.47)	
* * *	
Added pages to combined declaration and power of attorney for divisional, continuation, or	
continuation-in-part (C-I-P) application.  Number of pages added	
* * *	
Authorization of attorney(s) to accept and follow instructions from representative.	
* * *	
(if no further pages form a part of this Declaration, then end this Declaration with this page and check the following item)	
This declaration ends with this	s page.